PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004. es pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Vincent J. Sunderdick

TOTAL AMOUNT OF PAYMENT 910

Complete if Known					
Application Number	10/642,594				
Filing Date	August 19, 2003				
First Named Inventor	Nobuyasu KANEKAWA				
Examiner Name	T. Dickey				
Art Unit	2826				
Attorney Docket No.	056207.50307C1				

Date

March 17, 2005

METHOD OF PAYMENT	(check all that	apply)							
	ard Mon	ey Order 🔲	None	Other (please in	dentify):				
Deposit Account D	Deposit Account Deposit Account Number: 05-1323 (Docket No. 056207.50307C1) Deposit Account Number:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR 1.16 a	ind 1.17								
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information and authorization	on on PTO-2038.								
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						TION FEED			
	FILING	G FEES SEARCH FEES			EXAMINATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity <u>Fee (\$)</u>	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100	1 003 1 410 141		
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	3 200	100	0	0	0	0			
2. EXCESS CLAIM FEE	S.								
	•						Small Entity		
Fee Description	♦	1 - 1 - 1 - 1 - 1 - 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0		41 i 41i-i i		Fee (\$)	Fee (\$)		
Each claim over 20 or,					•	50	25		
Each independent clair		Reissues, each if	naepenaeni	ciaim more than in	the original p	atent 200 360	100		
Multiple dependent cla Total Claims	ims Extra claim	5 Engs(\$)	500 F	'aid (\$)	\$4		180		
4 -20 or H		s Fees(\$)	<u> </u>	ain (4)	Mul	tiple Dependence Fee(S)	Fee Paid (\$)		
HP = highest number of tota		oreater than 20				1 66/21	i ee r ald (\$)		
Indep. Claims	Extra claim	-	Fee F	aid (\$)			· · · · · · · · · · · · · · · · · · ·		
1 - 3 or HF	·	×	=						
HP = highest number of tota	I claims paid for, if	greater than 3							
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each									
additional 50 sheets or				, ,	•	- (6)	E. D. L. (A)		
Total Sheets - 100 =	Extra Sheets	/ 50 =	umber of eac	ch additional 50 or fra Round up to a whole		<u>Fee (\$)</u>	Fee Paid (\$)		
4. OTHER FEES		/ 30 =		Round up to a whole	number x		-		
4. OTHER PEES							Fee Paid (\$)		
Non-English Specification \$	130 fee (no small e	entity discount)					i ee raid (\$)		
Non-English Specification. \$130 fee (no small entity discount) Other: One-month Petition for Extension of Time							\$120		
Request for Continued Examination							\$790		
- Nequest ic	- Continued t						<u> </u>		
SUBMITTED BY									
	11-	11. 1		Registration No.					
Signature	"Whene?	Vimles	lest	(Attorney/Agent)	29,004	Telephone	(202) 624-2500		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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